



Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at <http://about.jstor.org/participate-jstor/individuals/early-journal-content>.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact support@jstor.org.

Change in the Composition and Function of the Brain by Psychic Influence. By F. RICHTER. Berliner Klin. Wochenschrift, February, 1887.

The stimulus of normal psychic activities, which it is the object of psychic therapeutics to apply, may be so devised as to be a powerful auxiliary, though always subordinate to diatic and physical means in curing certain brain diseases. This is especially the case in disturbances originating in shock, overwork, care, sorrow, losses, bad habits, and false education. All forms of psychic shock cause first local anaemia of the brain with probably less hyperaemia in adjacent regions. Cohnheim and Arndt hold (and the former claims to have experimentally demonstrated it) that repeated stimuli cause contraction of capillaries, and that if this has lasted long its cessation leaves the porosity of the capillary walls impaired so that the blood elements too freely saturate the brain and thus impair its functions. This unequal distribution of blood affects the vaso-motor sphere in turn, and arterial pressure and transudation and imbibition ensue. Arndt believes that the ganglion bodies thus tend to lose their processes, become apolar and even indistinguishable from adjacent nervous tissue, although, as Richter suggests, this begins to look like the results of inflammation. Such changes are ascribed to abnormal or excessive psychic stimulus, and the symptoms which attend them resemble those which follow cerebral neuroses of anaemic and dyscrasic origin, and may be attended by hemianaesthesia, neuralgia, exhaustion, lameness, cramp, aphasia, cardiac neuroses, nervous catarrh of nose, stomach, intestines, nervous metritis, irritability, depression, etc. But mental hygiene, wisely directed, has a regenerative influence. A deranged cortex with false psychic functions may have its abnormal tissue or compounds degenerated or decomposed by wise psychic regime. Morbid inhibitory stimuli may be neutralized by normal stimuli. For abulia with consequent lameness, excitement of the will is prescribed. Paralyses from fright are redressed by new psychic shock. The greatest tact is of course needed in such cases to hit the right nuance between sedative and stimulating influences and decide on just the right psychic state to neutralize the morbid one. The greatest personal ascendancy over the will and even imagination of the patient, and with of course isolation from too tender friends, is indispensable. Narrow-mindedness, conceit, stubbornness, and in fact pure psychoses generally, are harder to deal with than neuroses with psychopathic symptoms, and require ascendancy over the mind of the patient and an ability to impose a good psychic sphere, which makes the highest degree of confidence on the part of the patient absolutely indispensable. The weak point of this paper is the absence of indirect proof (direct being of course out of the question) of the underlying assumption of positive regeneration or "Rückbildung" of cell processes or other brain tissue.

On Changes in the Nervous System after Amputation of Limbs, with Bibliography and Recent Cases. E. S. REYNOLDS. Brain, January, 1887.

The conclusions of this valuable and comprehensive paper are that the numerous small fibres of the sciatic trunk after amputation are results of atrophy and not degeneration. This is ascribed to disuse only, connection with the trophic centres preventing degenerative